

AMENDMENT / RESPONSE TRANSMITTAL

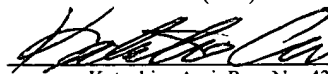
Applicant : Kazutaka IKEDA, et al.
App. No. : 10/073,647
Filed : February 11, 2002
For : METHOD FOR
EVALUATING DRUG
SENSITIVITY
Examiner : Teresa E. Strzelecka
Art Unit : 1637

CERTIFICATE OF MAILING

I hereby certify that this correspondence and all marked attachments are being deposited with the United States Postal Service as first-class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on

March 5, 2004

(Date)



Katsuhiro Arai, Reg. No. 43,315

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith for filing in the above-identified application are the following enclosures:

- (X) Amendment in five (5) pages.
- (X) Five (5) Declarations Under 37 C.F.R. §1.132:
No. 1 signed by Kazutaka IKEDA; No. 2 signed by Kazutaka IKEDA and Hiroaki NIKI; No. 3 signed by Ryoji YNAO; No. 4 signed by Toshiro KUMANISHI; and No. 5 signed by Toru Kobayashi.

The fee has been calculated as shown below:

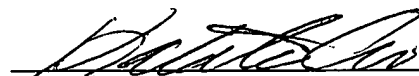
| FEE CALCULATION | | | | |
|--------------------|------------|--------------|----------------------|--------------|
| FEE TYPE | | FEE CODE | CALCULATION | TOTAL |
| Total Claims | 8 - 20 = 0 | 1202 (\$18) | 0 x 18 = | \$0 |
| Independent Claims | 1 - 3 = 0 | 1201 (\$86) | 0 x 86 = | \$0 |
| 2 Month Extension | | 1252 (\$420) | | \$420 |
| | | | TOTAL FEE DUE | \$420 |

- (X) An extension of time is hereby requested by payment of the appropriate fee indicated above.
- (X) A check in the amount of \$420.00 is enclosed.
- (X) Return prepaid postcard.

Docket No.: TOYAM85.001AUS

Customer No.: 20,995

- (X) Please charge any additional fees, including any fees for additional extension of time, or credit overpayment to Deposit Account No. 11-1410.



Katsuhiro Arai

Registration No. 43,315

Agent of Record

Customer No. 20,995

(949) 760-0404

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